

**FILED**  
UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
**DEC 16 2016**

**JEFFREY P. ALLSTEADT, CLERK**

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:  
**NORTHERN DISTRICT OF ILLINOIS**

Case number (if known): \_\_\_\_\_ Chapter you are filing under:

- ☒ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☐ Chapter 13

☐ Check if this is an amended filing

**Official Form 101**

**Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**About Debtor 1:**

**About Debtor 2 (Spouse Only in a Joint Case):**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**Angela**

First Name

**C**

Middle Name

**Loisi**

Last Name

Suffix (Sr., Jr., II, III)

First Name

Middle Name

Last Name

Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

First Name

Middle Name

Last Name

First Name

Middle Name

Last Name

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

xxx - xx - 6 9 6 9

OR

9xx - xx -

xxx - xx -

OR

9xx - xx -

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**About Debtor 1:**

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

☒ I have not used any business names or EINs.

Business name \_\_\_\_\_

Business name \_\_\_\_\_

Business name \_\_\_\_\_

EIN \_\_\_\_\_

EIN \_\_\_\_\_

**About Debtor 2 (Spouse Only in a Joint Case):**

☐ I have not used any business names or EINs.

Business name \_\_\_\_\_

Business name \_\_\_\_\_

Business name \_\_\_\_\_

EIN \_\_\_\_\_

EIN \_\_\_\_\_

5. Where you live

1326 N. Burling St.

Number Street

Chicago IL 60610

City State ZIP Code

Cook

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**If Debtor 2 lives at a different address:**

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

8. How you will pay the fee ☒ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).
- ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years? ☒ No
- ☐ Yes.
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? ☒ No
- ☐ Yes.
- Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_
- District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known
- Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_
- District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known

11. Do you rent your residence? ☐ No. Go to line 12.
- ☒ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
- ☒ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

12. Are you a sole proprietor of any full- or part-time business?
- ☐ No. Go to Part 4.
- ☒ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

**MAC Transcripts, LTD**

Name of business, if any

**1326 N. Burling Street,**

Number Street

**Chicago**

City

**IL**

State

**60610**

ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☒ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- ☒ No. I am not filing under Chapter 11.
- ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?
- ☒ No
- ☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?
- 16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.  
☒ Yes. Go to line 17.
- 16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.  
☐ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.
- 
17. Are you filing under Chapter 7?
- ☐ No. I am not filing under Chapter 7. Go to line 18.
- ☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☒ No  
☐ Yes
18. How many creditors do you estimate that you owe?
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1-49             | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199          | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999          |  |  |
19. How much do you estimate your assets to be worth?
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |
20. How much do you estimate your liabilities to be?
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                     | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000               | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000              | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input checked="" type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X Angela C Loisi  
Angela C Loisi, Debtor 1

Executed on 10/01/2016  
MM / DD / YYYY

X \_\_\_\_\_  
Signature of Debtor 2

Executed on \_\_\_\_\_  
MM / DD / YYYY

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**For you if you are filing this bankruptcy without an attorney**

**If you are represented by an attorney, you do not need to file this page.**

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

☐ No  
☒ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

☐ No  
☒ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

☐ No  
☒ Yes. Name of Person Daiva Indriuliene

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

X Angela C Loisi  
Angela C Loisi, Debtor 1

Date 10/01/2016  
MM / DD / YYYY

Contact phone \_\_\_\_\_

Cell phone (312) 404-6677

Email address \_\_\_\_\_

X \_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

Contact phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Email address \_\_\_\_\_



**Fill in this information to identify your case:**

Debtor 1 Angela C Loisi  
 First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number  
 (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 106Sum**

**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

**Your assets**  
 Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)
  - 1a. Copy line 55, Total real estate, from Schedule A/B..... **\$273,000.00**
  - 1b. Copy line 62, Total personal property, from Schedule A/B..... **\$1,648.00**
  - 1c. Copy line 63, Total of all property on Schedule A/B..... **\$274,648.00**

**Part 2: Summarize Your Liabilities**

**Your liabilities**  
 Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)
    - 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$400,748.68**
  3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)
    - 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$0.00**
    - 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + **\$122,170.26**
- Your total liabilities** **\$522,918.94**

**Part 3: Summarize Your Income and Expenses**

4. *Schedule I: Your Income* (Official Form 106I)
 

Copy your combined monthly income from line 12 of Schedule I..... **\$3,552.93**
5. *Schedule J: Your Expenses* (Official Form 106J)
 

Copy your monthly expenses from line 22c of Schedule J..... **\$3,495.90**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

**\$3,553.38**

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$22,547.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<u>+ \$0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.	<b><u>\$22,547.00</u></b>

**Fill in this information to identify your case and this filing:**

Debtor 1 Angela C Loisi  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number  
(if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 106A/B**

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.  
☒ Yes. Where is the property?

1.1.

**Primary Residence**

**Townhome**  
**1326 N Burling St.,**  
**Chicago IL 60610-5265**

County \_\_\_\_\_

**What is the property?**

Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other Primary Residence

**Who has an interest in the property?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<u>\$273,000.00</u>	<u>\$273,000.00</u>

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Purchase Money**

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

→ **\$273,000.00**

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No  
☒ Yes

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

3.1. **Who has an interest in the property?** Do not deduct secured claims or exemptions. Put the  
 Make: **HONDA** Check one. amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.  
 Model: **CR\_V** ☒ Debtor 1 only  
 Year: **2014** ☐ Debtor 2 only  
 Approximate mileage: **12,000** ☐ Debtor 1 and Debtor 2 only  
 Other information: ☐ At least one of the debtors and another **Current value of the entire property?** **\$0.00** **Current value of the portion you own?** **\$0.00**

**2014 HONDA CR\_V (approx. 12000 miles)** ☐ Check if this is community property (see instructions)

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**  
*Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*

☒ No  
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

**\$0.00**

### Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

*Examples: Major appliances, furniture, linens, china, kitchenware*

☐ No

☒ Yes. Describe..... **General and ordinary household goods and furnishings**

**\$650.00**

7. **Electronics**

*Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games*

☒ No

☐ Yes. Describe.....

8. **Collectibles of value**

*Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles*

☒ No

☐ Yes. Describe.....

9. **Equipment for sports and hobbies**

*Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments*

☒ No

☐ Yes. Describe.....

10. **Firearms**

*Examples: Pistols, rifles, shotguns, ammunition, and related equipment*

☒ No

☐ Yes. Describe.....

11. **Clothes**

*Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories*

☐ No

☒ Yes. Describe..... **Necessary wearing apparel**

**\$175.00**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe..... **Costume jewelry**

\$90.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....**

**\$915.00**

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes..... Cash: \$65.00

**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes..... Institution name:

17.1. Other financial account: CHASE, checking account No: 000000203295572 \$168.00

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☐ No

☒ Yes..... Institution or issuer name:

**Stock in MAC Transcripts, Ltd  
Non-liquid**

\$500.00

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No  
☐ Yes. Give specific information about them..... Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No  
☐ Yes. List each account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company  
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No  
☐ Yes..... Institution name or individual:

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- ☒ No  
☐ Yes..... Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No  
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

Money or property owed to you?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- ☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \$0.00  
State: \$0.00  
Local: \$0.00

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information

Alimony: \$0.00

Maintenance: \$0.00

Support: \$0.00

Divorce settlement: \$0.00

Property settlement: \$0.00

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No

☐ Yes. Give specific information

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

☒ No

☐ Yes. Describe each claim.....

**35. Any financial assets you did not already list**

☒ No

☐ Yes. Give specific information

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

**\$733.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

Current value of the  
portion you own?  
Do not deduct secured  
claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No  
☐ Yes. Describe..

\_\_\_\_\_

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No  
☐ Yes. Describe..

\_\_\_\_\_

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No  
☐ Yes. Describe..

\_\_\_\_\_

41. Inventory

- ☒ No  
☐ Yes. Describe..

\_\_\_\_\_

42. Interests in partnerships or joint ventures

- ☒ No  
☐ Yes. Describe..... Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations

- ☒ No  
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
☐ No  
☐ Yes. Describe.....

\_\_\_\_\_

44. Any business-related property you did not already list

- ☒ No  
☐ Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....

→ \$0.00

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

Current value of the  
portion you own?  
Do not deduct secured  
claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☒ No  
☐ Yes....

\_\_\_\_\_



Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**48. Crops--either growing or harvested**

- ☒ No  
☐ Yes. Give specific information.....

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No  
☐ Yes....

**50. Farm and fishing supplies, chemicals, and feed**

- ☒ No  
☐ Yes....

**51. Any farm- and commercial fishing-related property you did not already list**

- ☒ No  
☐ Yes. Give specific information.....

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....**

→ **\$0.00**

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples: Season tickets, country club membership*

- ☒ No  
☐ Yes. Give specific information.

**54. Add the dollar value of all of your entries from Part 7. Write that number here.....**

→ **\$0.00**

**Part 8: List the Totals of Each Part of this Form**

- 55. Part 1: Total real estate, line 2.....** → **\$273,000.00**
- 56. Part 2: Total vehicles, line 5** **\$0.00**
- 57. Part 3: Total personal and household items, line 15** **\$915.00**
- 58. Part 4: Total financial assets, line 36** **\$733.00**
- 59. Part 5: Total business-related property, line 45** **\$0.00**
- 60. Part 6: Total farm- and fishing-related property, line 52** **\$0.00**
- 61. Part 7: Total other property not listed, line 54** **\$0.00**
- 62. Total personal property. Add lines 56 through 61.....** **\$1,648.00** Copy personal property total → **\$1,648.00**
- 63. Total of all property on Schedule A/B. Add line 55 + line 62.....** **\$274,648.00**

**Fill in this information to identify your case:**

Debtor 1	<u>Angela</u>	<u>C</u>	<u>Loisi</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number (if known)			

☐ Check if this is an amended filing

**Official Form 106C**

**Schedule C: The Property You Claim as Exempt**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own  Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>Primary Residence</b> <b>Townhome</b> <b>1326 N Burling St.,</b> <b>Chicago IL 60610-5265</b> Line from <i>Schedule A/B</i> : <u>1.1</u>	<u>\$273,000.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <b>2014 HONDA CR_V (approx. 12000 miles)</b> Line from <i>Schedule A/B</i> : <u>3.1</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$160,375?  
 (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No  
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
☐ No  
☐ Yes

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>General and ordinary household goods and furnishings</b> Line from Schedule A/B: <u>6</u>	<u>\$650.00</u>	<input checked="" type="checkbox"/> <u>\$650.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <b>Necessary wearing apparel</b> Line from Schedule A/B: <u>11</u>	<u>\$175.00</u>	<input checked="" type="checkbox"/> <u>\$175.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <b>Costume jewelry</b> Line from Schedule A/B: <u>12</u>	<u>\$90.00</u>	<input checked="" type="checkbox"/> <u>\$90.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <b>USD \$65.00</b> Line from Schedule A/B: <u>16</u>	<u>\$65.00</u>	<input checked="" type="checkbox"/> <u>\$65.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <b>CHASE, checking account No: 000000203295572</b> Line from Schedule A/B: <u>17.1</u>	<u>\$168.00</u>	<input checked="" type="checkbox"/> <u>\$168.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <b>Stock in MAC Transcripts, Ltd Non-liquid</b> Line from Schedule A/B: <u>18</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Angela C Loisi**

CASE NO

CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$273,000.00	\$399,069.68	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$0.00	\$1,679.00	\$0.00	\$0.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$650.00	\$650.00	\$0.00	\$650.00	\$0.00
7.	Electronics	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$175.00	\$175.00	\$0.00	\$175.00	\$0.00
12.	Jewelry	\$90.00	\$90.00	\$0.00	\$90.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household items- incl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$65.00	\$65.00	\$0.00	\$65.00	\$0.00
17.	Deposits of money	\$168.00	\$168.00	\$0.00	\$168.00	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$500.00	\$500.00	\$0.00	\$500.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Angela C Loisi**

CASE NO

CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet # 1*

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops—either growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTALS:</b>		<b>\$274,648.00</b>	<b>\$402,396.68</b>	<b>\$0.00</b>	<b>\$1,648.00</b>	<b>\$0.00</b>

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)

IN RE: Angela C Loisi

CASE NO

CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

Continuation Sheet # 2

**Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity
<b><u>Real Property</u></b>			
(None)			
<b><u>Personal Property</u></b>			
(None)			
<b>TOTALS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Non-Exempt Property by Item:**

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<b><u>Real Property</u></b>				
(None)				
<b><u>Personal Property</u></b>				
(None)				
<b>TOTALS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

Summary	
A. Gross Property Value (not including surrendered property)	\$274,648.00
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$274,648.00
D. Gross Amount of Encumbrances (not including surrendered property)	\$402,396.68
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$402,396.68
G. Total Equity (not including surrendered property) / (A-D)	\$0.00
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$0.00
J. Total Exemptions Claimed	\$1,648.00
K. Total Non-Exempt Property Remaining (G-J)	\$0.00

**Fill in this information to identify your case:**

Debtor 1	<u>Angela</u>	<u>C</u>	<u>Loisi</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number (if known)			

☐ Check if this is an amended filing

**Official Form 106D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
<u>\$38,000.00</u>	<u>\$273,000.00</u>	<u>\$38,000.00</u>

2.1  
**Franklin Credit Management Co**  
 Creditor's name  
101 Hudson St., 25th Flr.  
 Number Street

Describe the property that  
secures the claim:  
Primary Residence

Jersey City NJ 07302  
 City State ZIP Code

**Who owes the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates  
to a community debt

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset)

**Purchase Money**

Date debt was incurred 09/2005 Last 4 digits of account number 8 0 3 0

Add the dollar value of your entries in Column A on this page. Write that number here:

\$38,000.00

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

Part 1:	Additional Page	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
After listing any entries on this page, number them sequentially from the previous page.				

2.2	Describe the property that secures the claim:	\$1,679.00	\$0.00	\$1,679.00
<b>HONDA Finance</b> Creditor's name <b>P.O. Box: 60001</b> Number Street				
City Of Industry CA 91716 City State ZIP Code				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Auto Lease</b>				
Date debt was incurred 05/2014		Last 4 digits of account number 9 8 1 1		

2.3	Describe the property that secures the claim:	\$361,069.68	\$273,000.00	\$88,069.68
<b>Ocwen Loan Servicing, LLC</b> Creditor's name <b>PO Box 24738</b> Number Street				
West Palm Beach FL 33416-4738 City State ZIP Code				
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Purchase Money</b>				
Date debt was incurred 09/2005		Last 4 digits of account number 3 1 8 1		

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$362,748.68

\$400,748.68



**Fill in this information to identify your case:**

Debtor 1	<u>Angela</u>	<u>C</u>	<u>Loisi</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number			
(if known)			

☐ Check if this is an amended filing

**Official Form 106E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.  
☐ Yes.

2. **List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with you other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

**\$108.00**

4.1

**ADT Security Services**

Nonpriority Creditor's Name

**P.O. Box 672279**

Number Street

Last 4 digits of account number 7 5 8 3

When was the debt incurred? 06/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Dallas TX 75267-2279**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Non-Purchase Money**

4.2

**Allied Interstate, Inc**

Nonpriority Creditor's Name

**POB 4000**

Number Street

Last 4 digits of account number 8 3 5 5

When was the debt incurred? 08/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Warrenton VA 20188**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Collecting for - Fifth Third Bank**

**\$206.45**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3

\$3,861.00

**AMERICA EXPRESS**

Nonpriority Creditor's Name

**P.O. BOX 7871**

Number Street

Last 4 digits of account number **5 7 0 3**

When was the debt incurred? **02/2005**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Fort Lauderdale FL 33329**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.4

\$37.00

**American Financial CRE**

Nonpriority Creditor's Name

**9247 N Meridian St., Suite 2**

Number Street

Last 4 digits of account number **3 6 7 7**

When was the debt incurred? **01/2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Indianapolis IN 46260**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Medical**

4.5

\$122.00

**Arnold Scott Harris, P.C.**

Nonpriority Creditor's Name

**222 Merchandise Mart Plaza, Suite 1932**

Number Street

Last 4 digits of account number **4 9 2 0**

When was the debt incurred? **06/2012**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago IL 60654**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - City of Chicago**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.6

\$267.83

**Athletic & Therapeutic Inst**

Nonpriority Creditor's Name

**4947 Paysphere Circle**

Number Street

Last 4 digits of account number 8 1 3 7

When was the debt incurred? 11/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago** **IL** **60674-4947**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**

4.7

\$836.00

**BARCLAYS BANK DELAWARE**

Nonpriority Creditor's Name

**1007 Orange St., Suite 1541**

Number Street

Last 4 digits of account number 2 8 2 1

When was the debt incurred? 09/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**WILMINGTON** **DE** **19801**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.8

\$5,348.69

**Blatt, Haseenmiller, Leibsker & Moore LL**

Nonpriority Creditor's Name

**10 South LaSalle St., Suite 2200**

Number Street

Last 4 digits of account number 8 9 4 5

When was the debt incurred? 02/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago** **IL** **60603-1069**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Capital One Bank**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.9

\$755.02

**Calvary Portfolio Service, LLC**

Nonpriority Creditor's Name

**P.O. Box 27288**

Number Street

Last 4 digits of account number 2 9 6 3

When was the debt incurred? 05/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Tempe** **AZ** **85285-7288**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Capital One**

4.10

\$1,805.00

**Capital One**

Nonpriority Creditor's Name

**PO Box 85015**

Number Street

Last 4 digits of account number 0 4 4 3

When was the debt incurred? 08/2002

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Richmond** **VA** **23285-5075**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.11

\$300.00

**Capital One Bank**

Nonpriority Creditor's Name

**PO. Box 5253**

Number Street

Last 4 digits of account number 0 6 0 9

When was the debt incurred? 08/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Carol Stream** **IL** **60197**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.12

\$317.00

**Capital One Bank**

Nonpriority Creditor's Name

**PO Box 85015**

Number Street

Last 4 digits of account number 0 2 7 9

When was the debt incurred? 04/2003

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Richmond**

**VA**

**23285**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.13

\$1,800.00

**Capital One Bank**

Nonpriority Creditor's Name

**Kierland One**

Number Street

Last 4 digits of account number 0 0 0 4

When was the debt incurred? 03/2006

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Scottsdale**

**AZ**

**85254**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.14

\$930.00

**Capital One Bank**

Nonpriority Creditor's Name

**PO. Box 5253**

Number Street

Last 4 digits of account number 2 0 5 8

When was the debt incurred? 08/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Carol Stream**

**IL**

**60197**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.15

\$5,350.00

**Capital One Bank**

Nonpriority Creditor's Name

**PO Box 85015**

Number Street

Last 4 digits of account number 8 1 5 3

When was the debt incurred? 01/2002

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Richmond**

**VA**

**23285**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.16

\$356.00

**Capital One/Best Buy**

Nonpriority Creditor's Name

**PO Box 30253**

Number Street

**Salt Lake City, UT 84130.0253**

Last 4 digits of account number 3 1 0 7

When was the debt incurred? 01/2009

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.17

\$750.00

**CB/Annty Lr**

Nonpriority Creditor's Name

**PO Box 182273**

Number Street

Last 4 digits of account number 3 0 7 2

When was the debt incurred? 09/2006

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Columbus**

**OH**

**43218**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.18

**\$500.00**

**CB/DRSSBRN**

Nonpriority Creditor's Name

**PO Box 182273**

Number Street

Last 4 digits of account number 5 2 0 2

When was the debt incurred? 03/2013

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Columbus**

**OH**

**43218**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.19

**\$460.00**

**CB/VICSCRT**

Nonpriority Creditor's Name

**PO Box 182789**

Number Street

Last 4 digits of account number 7 4 8 1

When was the debt incurred? 02/2006

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Columbus**

**OH**

**43218**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.20

**\$3,843.00**

**Chase**

Nonpriority Creditor's Name

**201 N Walnut St.**

Number Street

Last 4 digits of account number 6 2 3 8

When was the debt incurred? 10/2006

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Wilmington**

**DE**

**19801**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**



Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.21

\$300.00

**Chase - CC**

Nonpriority Creditor's Name  
**225 Chastain Meadows Ct, NW**  
Number Street

Last 4 digits of account number 6 2 5 0

When was the debt incurred? 08/1997

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Kennesaw GA 30144**  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.22

\$541.00

**Chase/Circuitcity**

Nonpriority Creditor's Name  
**225 Chastain Meadows Ct, NW**  
Number Street

Last 4 digits of account number x x x x

When was the debt incurred? 08/1997

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Kennesaw GA 30144**  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.23

\$585.50

**Chicago Gastroenterology**

Nonpriority Creditor's Name  
**Dr. Samuel Castillo**  
Number Street  
**1431 N Western Ave., Suite 133**

Last 4 digits of account number 5 6 3 3

When was the debt incurred? 05/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago IL 60622**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Non-Purchase Money**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.24

**\$183.00**

**Choice Recovery**

Nonpriority Creditor's Name

**1550 Old Henderson Rd St,**

Number Street

Last 4 digits of account number 3 1 5 4

When was the debt incurred? 10/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Columbus OH 43220**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Medical**

4.25

**\$1,972.00**

**Citi**

Nonpriority Creditor's Name

**PO Box 6500 C/O Citi Corp**

Number Street

Last 4 digits of account number x x x x

When was the debt incurred? 01/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Sioux Falls SD 57117**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.26

**\$7,166.00**

**CitiFLEX**

Nonpriority Creditor's Name

**PO Box 6241**

Number Street

Last 4 digits of account number 2 7 9 4

When was the debt incurred? 08/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Sioux Falls SD 57117**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.27

\$200.00

**City of Chicago**

Nonpriority Creditor's Name

**Department of Revenue**

Number Street

**POB 88292**

Last 4 digits of account number 4 9 2 0

When was the debt incurred? 04/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago**

**IL**

**60680-1290**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Ticket**

4.28

\$7,166.43

**Credit Control, LLC**

Nonpriority Creditor's Name

**P.O. Box 31179**

Number Street

Last 4 digits of account number 8 9 5 0

When was the debt incurred? 05/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Tampa**

**FL**

**33631**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Citi Bank**

4.29

\$150.00

**Credit Protection Association, L.P.**

Nonpriority Creditor's Name

**13355 Noel Rd**

Number Street

Last 4 digits of account number 4 6 0 0

When was the debt incurred? 08/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Dallas**

**TX**

**75240**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for -**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.30

\$237.16

**Diversified Consultants, Inc.**

Nonpriority Creditor's Name

PO Box 551268

Number Street

Jacksonville FL 32255.1268

Last 4 digits of account number 7 4 6 5

When was the debt incurred? 10/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
Collecting for - AT & T

4.31

\$226.00

**DSG Collect**

Nonpriority Creditor's Name

P.O. BOX 80185

Number Street

Last 4 digits of account number 6 3 3 4

When was the debt incurred? 06/2009

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Phoenix AZ 85060

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
Collecting for - Medical

4.32

\$4,000.00

**Dupage Credit Union**

Nonpriority Creditor's Name

1515 Bond St.

Number Street

Last 4 digits of account number 3 9 0 1

When was the debt incurred? 02/2005

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Naperville IL 60563

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
Credit Card

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.33

**Dynamic Recovery Solutions**

Nonpriority Creditor's Name

**PO Box 25759**

Number Street

**Greenville**

**SC**

**29616-0759**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 3 1 1 2

When was the debt incurred? 02/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

Collecting for - Capital One

\$755.02

4.34

**Dynia & Associates, LLC**

Nonpriority Creditor's Name

**1400 E. Touhy Ave., Suite G2**

Number Street

**Des Plaines**

**IL**

**60018**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 5 5 5 4

When was the debt incurred? 10/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

Collecting for - Capital One

\$755.02

4.35

**EIS Collections**

Nonpriority Creditor's Name

**P.O. Box 1730**

Number Street

**Reynoldzburg**

**OH**

**43068-8730**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 3 4 0 6

When was the debt incurred? 07/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

Collecting for - CITI

\$7,166.43

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.36

**\$7,166.43**

**FMS Inc.**

Nonpriority Creditor's Name

**PO Box 707601**

Number Street

Last 4 digits of account number 6 3 6 7

When was the debt incurred? 12/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Tulsa** **OK** **74170-7601**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - CITI**

4.37

**\$237.00**

**Franklin Collection Services**

Nonpriority Creditor's Name

**2978 W Jackson St.**

Number Street

Last 4 digits of account number 0 0 1 3

When was the debt incurred? 09/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Tupelo** **MS** **38801**  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - AT & T**

4.38

**\$7,166.43**

**Global Credit & Collection Corp**

Nonpriority Creditor's Name

**2699 Lee Rd.**

Number Street

Last 4 digits of account number 5 3 8 4

When was the debt incurred? 07/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Winter Park** **FL** **32789**  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Citi Bank**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.39

\$75.00

**Grant & Weber**

Nonpriority Creditor's Name

**1515 E. Tropicana Ave Ste**

Number Street

Last 4 digits of account number 9 6 0 3

When was the debt incurred? 02/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Las Vegas**

**NV**

**89119**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Medical**

4.40

\$127.10

**I.C. SYSTEM, INC.**

Nonpriority Creditor's Name

**444 Highway 96 East,**

Number Street

**P.O. Box 64378**

Last 4 digits of account number 3 3 0 4

When was the debt incurred? 01/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**ST. PAUL**

**MN**

**55164-0378**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - RCN Corporation**

4.41

\$235.60

**I.C.S., Collection Service**

Nonpriority Creditor's Name

**PO Box 1010**

Number Street

Last 4 digits of account number 1 4 2 5

When was the debt incurred? 05/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Tinley Park**

**IL**

**60477-9110**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Medical**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.42

\$755.02

**J.C. Christensen & Associates, Inc**

Nonpriority Creditor's Name

**P.O. Box 519**

Number Street

Last 4 digits of account number 8 2 3 9

When was the debt incurred? 01/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Sauk Rapids**

**MN**

**56379**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Capital One**

4.43

\$2,216.80

**Labarotary Corporation of America**

Nonpriority Creditor's Name

**P.O. Box 2240**

Number Street

Last 4 digits of account number 0 4 6 3

When was the debt incurred? 05/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Burlington**

**NC**

**27216-2240**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Non-Purchase Money**

4.44

\$2,216.80

**Labarotary Corporation of America**

Nonpriority Creditor's Name

**P.O. Box 2240**

Number Street

Last 4 digits of account number 0 4 6 3

When was the debt incurred? 05/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Burlington**

**NC**

**27216-2240**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Non-Purchase Money**



Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.45

\$457.70

**Law Offices of Joel Cardis, LLC**

Nonpriority Creditor's Name

**2006 Sweede Rd., Suite 100**

Number Street

Last 4 digits of account number **4 5 6 5**

When was the debt incurred? **06/2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**E. Norriton**

**PA**

**19401**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for -**

4.46

\$50.00

**Merchants' Credit Guide Co.**

Nonpriority Creditor's Name

**223 W Jackson St**

Number Street

Last 4 digits of account number **5 9 9 0**

When was the debt incurred? **07/2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago**

**IL**

**60606**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Medical Payment Data**

4.47

\$50.00

**Midwest Orthopaedic at RUSH, LLC**

Nonpriority Creditor's Name

**1Westbrook Corporate Center, Suite 240**

Number Street

Last 4 digits of account number **7 0 2 5**

When was the debt incurred? **02/2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Westchester**

**IL**

**60154**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Non-Purchase Money**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.48

**\$836.67**

**Nationwide Credit, Inc.**

Nonpriority Creditor's Name

**P.O. Box 26314**

Number Street

Last 4 digits of account number 8 7 3 9

When was the debt incurred? 11/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Lehigh Vally** **PA** **18002**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Barclaycard US**

4.49

**\$22,547.00**

**Navient**

Nonpriority Creditor's Name

**Department of Education and Loan Service**

Number Street

**P.O. Box 9635**

Last 4 digits of account number 0 0 2 1

When was the debt incurred? 11/2002

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Wilkes-Barre** **PA** **18773-9635**  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

4.50

**\$753.58**

**NCB Management Services Incorporated**

Nonpriority Creditor's Name

**PO Box 1099**

Number Street

Last 4 digits of account number 2 0 2 4

When was the debt incurred? 06/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Langhorne** **PA** **19047**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Capital One**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.51

\$1,805.15

**Northland Group Inc.**

Nonpriority Creditor's Name

**PO Box 390846**

Number Street

**Minneapolis, MN 55439**

**Mail Code CPT1**

Last 4 digits of account number 9 5 9 4

When was the debt incurred? 07/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Capital One Bank**

4.52

\$836.67

**Phillips & Cohen Associates, LTD**

Nonpriority Creditor's Name

**Mailstop 661, 1002 Justison St.,**

Number Street

**Wilmington, DE 19801.5148**

Last 4 digits of account number 5 4 4 5

When was the debt incurred? 03/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Barclays Bank Delaware**

4.53

\$1,805.00

**Portfolio Recvry & Affil**

Nonpriority Creditor's Name

**120 Corporate Blvd, #1**

Number Street

Last 4 digits of account number 2 5 6 0

When was the debt incurred? 10/2013

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Norfolk VA 23502**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Capital One Bank**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.54

\$232.27

**Professional Debt Collectors**

Nonpriority Creditor's Name

**P.O. Box 90508**

Number Street

Last 4 digits of account number 3 4 8 1

When was the debt incurred? 06/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Sioux Falls SD 57109-0508**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for -**

4.55

\$30.00

**Quest Diagnostics**

Nonpriority Creditor's Name

**PO Box 7306**

Number Street

Last 4 digits of account number 0 8 5 1

When was the debt incurred? 08/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Hollister MO 65673-7306**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical bills**

4.56

\$281.48

**RCN**

Nonpriority Creditor's Name

**Bradley Place Business Center**

Number Street

**2640 West Bradley Place,**

Last 4 digits of account number 3 3 0 4

When was the debt incurred? 06/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago IL 60618**  
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Non-Purchase Money**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.57

\$30.80

**Resurrection Med Grp St Mary**

Nonpriority Creditor's Name

**P.O. Box 366**

Number Street

Last 4 digits of account number 4 1 7 8

When was the debt incurred? 11/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Hinsdale IL 60522**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Non-Purchase Money**

4.58

\$75.52

**Resurrection Med Grp St Mary**

Nonpriority Creditor's Name

**P.O. Box 366**

Number Street

Last 4 digits of account number 0 2 1 7

When was the debt incurred? 11/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Hinsdale IL 60522**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Non-Purchase Money**

4.59

\$44.11

**RMCB**

Nonpriority Creditor's Name

**4 Westchester Plaza,**

Number Street

**Bldg. 4, F1**

Last 4 digits of account number 7 8 3 5

When was the debt incurred? 04/28/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**MsFord NY 10523**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Collecting for - Rodale**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.60

\$45.85

**SKO Brenner American, Inc.**

Nonpriority Creditor's Name

**40 Daniel Street**

Number Street

**PO Box 230**

Last 4 digits of account number 1 3 8 7

When was the debt incurred? 05/02/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Frmngdale NY 11735-0230**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - BeachBody**

4.61

\$275.60

**Specified Credit Association, Inc**

Nonpriority Creditor's Name

**2388 Schuetz, Suite A-100,**

Number Street

**St. Louis, MO 963146**

Last 4 digits of account number 4 8 9 1

When was the debt incurred? 08/2010

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Club Ready, Inc**

4.62

\$600.00

**SYNCB/AMAZ**

Nonpriority Creditor's Name

**PO. Box 981432**

Number Street

Last 4 digits of account number 1 4 5 7

When was the debt incurred? 04/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**El Paso TX 79998**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.63

\$3,500.00

**SYNCB/CARE**

Nonpriority Creditor's Name

**P.O. BOX 276 Mail Code Oh3-4258**

Number Street

Last 4 digits of account number 5 9 0 5

When was the debt incurred? 11/2004

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Dayton OH 45401**  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.64

\$3,500.00

**SYNCB/CARE**

Nonpriority Creditor's Name

**P.O. BOX 276**

Number Street

Last 4 digits of account number 9 5 7 1

When was the debt incurred? 11/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Dayton OH 45401**  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

4.65

\$182.00

**SYNCB/JCP**

Nonpriority Creditor's Name

**PO BOX 965008**

Number Street

Last 4 digits of account number 8 5 4 2

When was the debt incurred? 12/1996

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Orlando FL 32896-5060**  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Credit Card**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.66

\$182.00

**SYNCB/JCP**

Nonpriority Creditor's Name

**PO Box 981131**

Number Street

Last 4 digits of account number x x x x

When was the debt incurred? 12/1996

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**El Paso**

**TX**

**79998**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.67

\$300.00

**SYNCB/TJX**

Nonpriority Creditor's Name

**4125 Woodward Plaza**

Number Street

Last 4 digits of account number 0 0 5 0

When was the debt incurred? 04/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Alpharetta**

**GA**

**30005**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.68

\$650.00

**THE NORTHWESTERN SPECIALISTS FOR W**

Nonpriority Creditor's Name

**P.O. BOX: 95145**

Number Street

Last 4 digits of account number 3 5 7 8

When was the debt incurred? 06/15/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**PALATINE**

**IL**

**60095-5145**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**



Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.69

\$267.83

**TransWorld Systems Inc**

Nonpriority Creditor's Name

**507 Prudential Rd.**

Number Street

Last 4 digits of account number 8 1 3 7

When was the debt incurred? 05/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Horsham**

**PA**

**19044**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

Collecting for -ATI Physical Therapy

4.70

\$1,168.00

**Trustmark Recovery Services**

Nonpriority Creditor's Name

**541 Otis Bowen Drive**

Number Street

Last 4 digits of account number 6 8 0 0

When was the debt incurred? 01/2011

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Munster**

**IN**

**46321**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

Collecting for - University Of Illinois

4.71

\$818.00

**VON MAUR**

Nonpriority Creditor's Name

**6565 Brady**

Number Street

Last 4 digits of account number 4 1 4 7

When was the debt incurred? 05/2004

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Davenport**

**IA**

**52806**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

Credit Card

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.72

\$20.00

**Weltzer-Maite PC DBA Pearle Express**

Nonpriority Creditor's Name

**5501 W 79TH ST Suite 400**

Number Street

Last 4 digits of account number 6 4 9 4

When was the debt incurred? 10/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Burbank IL 60459-2190**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Non-Purchase Money**

4.73

\$1,272.30

**Wrigleyville Dental**

Nonpriority Creditor's Name

**Holistic Dentistry**

Number Street

**3256 North Ashland Ave.,**

Last 4 digits of account number 0 0 6 7

When was the debt incurred? 09/06/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago IL 60657**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical**

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <span style="border: 1px solid black; padding: 2px;"><u>\$0.00</u></span>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$22,547.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$99,623.26</u>
	6j. Total. Add lines 6f through 6i.	6j. <span style="border: 1px solid black; padding: 2px;"><u>\$122,170.26</u></span>

**Fill in this information to identify your case:**

Debtor 1	<u>Angela</u>	<u>C</u>	<u>Loisi</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number			
(if known)			

☐ Check if this is an amended filing

**Official Form 106G**

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

Person or company with whom you have the contract or lease

State what the contract or lease is for

**2.1 HONDA Finance**

Name

Auto lease with father

**P.O. Box: 60001**

Contract to be ASSUMED

Number Street

**City Of Industry**

**CA**

**91716**

City

State

ZIP Code

**Fill in this information to identify your case:**

Debtor 1	<u>Angela</u>	<u>C</u>	<u>Loisi</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

**Official Form 106H**

**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)  
☒ No  
☐ Yes
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  
☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☐ No  
☐ Yes
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

**Fill in this information to identify your case:**

Debtor 1	<b>Angela</b>	<b>C</b>	<b>Loisi</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>NORTHERN DISTRICT OF ILLINOIS</b>		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

**Occupation**

**Employer's name**

**Employer's address**

**Debtor 1**

- ☐ Employed
- ☒ Not employed

Number Street

City State Zip Code

**Debtor 2 or non-filing spouse**

- ☐ Employed
- ☐ Not employed

Number Street

City State Zip Code

How long employed there? \_\_\_\_\_

**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <b>\$0.00</b>	
3. Estimate and list monthly overtime pay.	3. + <b>\$0.00</b>	
4. Calculate gross income. Add line 2 + line 3.	4. <b>\$0.00</b>	

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

For Debtor 1 For Debtor 2 or non-filing spouse

Copy line 4 here ..... → 4. \$0.00

5. List all payroll deductions:

5a. Tax, Medicare, and Social Security deductions 5a. \$0.00

5b. Mandatory contributions for retirement plans 5b. \$0.00

5c. Voluntary contributions for retirement plans 5c. \$0.00

5d. Required repayments of retirement fund loans 5d. \$0.00

5e. Insurance 5e. \$0.00

5f. Domestic support obligations 5f. \$0.00

5g. Union dues 5g. \$0.00

5h. Other deductions. 5h. \$0.00  
 Specify: \_\_\_\_\_

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00

7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00

8. List all other income regularly received:

8a. Net income from rental property and from operating a business, profession, or farm 8a. \$3,552.93  
 Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8b. Interest and dividends 8b. \$0.00

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive 8c. \$0.00  
 Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8d. Unemployment compensation 8d. \$0.00

8e. Social Security 8e. \$0.00

8f. Other government assistance that you regularly receive 8f. \$0.00  
 Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  
 Specify: \_\_\_\_\_

8g. Pension or retirement income 8g. \$0.00

8h. Other monthly income. 8h. \$0.00  
 Specify: \_\_\_\_\_

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$3,552.93

10. Calculate monthly income. Add line 7 + line 9. 10. \$3,552.93 +        = \$3,552.93  
 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: \_\_\_\_\_ 11. + \$0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 12. \$3,552.93  
 Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

- ☒ No.  
☐ Yes. Explain:

None.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

8a. Attached Statement (Debtor 1)

**Angela Loisi & MAC Transcripts, Inc**

**Gross Monthly Income:** \$8,326.44

<u>Expense</u>	<u>Category</u>	<u>Amount</u>
Contract Labor	Operating Expence	\$948.42
Telecom & Internet	Operating Expence	\$335.92
Business Vehicle and Public Transportation and Tais	Operating Expence	\$536.00
Bank Fees	Operating Expence	\$32.50
Suscriptions, Memberships and office supplies and equipment	Operating Expence	\$426.25
Legal & Profesional Costs	Operating Expence	\$133.00
Advertising	Operating Expence	\$244.00
Office and Utilities	Operating Expence	\$1,113.00
Annual Corp Fee	Operating Expence	\$11.11
Travel	Operating Expence	\$411.00
Mandatory Court Attire and Maintanence	Operating Expence	\$383.42
IL Replacement Tax	Operating Expence	\$23.22
Meals and Entertainment	Operating Expence	\$175.67
<b>Total Monthly Expenses</b>		<u>\$4,773.51</u>
<b>Net Monthly Income:</b>		<u><u>\$3,552.93</u></u>



**Fill in this information to identify your case:**

Debtor 1 Angela C Loisi  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number  
(if known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

**Official Form 106J**

**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

**1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes. Fill out this information for each dependent.....	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
				<input type="checkbox"/> No
				<input type="checkbox"/> Yes
				<input type="checkbox"/> No
				<input type="checkbox"/> Yes
				<input type="checkbox"/> No
				<input type="checkbox"/> Yes
				<input type="checkbox"/> No
				<input type="checkbox"/> Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

**Your expenses**

**4. The rental or home ownership expenses for your residence.**  
Include first mortgage payments and any rent for the ground or lot.

4. \$1,214.61

If not included in line 4:

4a. Real estate taxes

4a. \_\_\_\_\_

4b. Property, homeowner's, or renter's insurance

4b. \$86.08

4c. Home maintenance, repair, and upkeep expenses

4c. \_\_\_\_\_

4d. Homeowner's association or condominium dues

4d. \_\_\_\_\_

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Your expenses**

5. Additional mortgage payments for your residence, such as home equity loans	5.	_____
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	_____ <b>\$360.00</b>
6b. Water, sewer, garbage collection	6b.	_____
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	_____ <b>\$175.00</b>
6d. Other. Specify: _____	6d.	_____
7. Food and housekeeping supplies	7.	_____ <b>\$450.00</b>
8. Childcare and children's education costs	8.	_____
9. Clothing, laundry, and dry cleaning	9.	_____ <b>\$85.00</b>
10. Personal care products and services	10.	_____ <b>\$50.00</b>
11. Medical and dental expenses	11.	_____
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	_____ <b>\$60.00</b>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	_____
14. Charitable contributions and religious donations	14.	_____
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____ <b>\$33.99</b>
15b. Health insurance	15b.	_____ <b>\$405.04</b>
15c. Vehicle insurance	15c.	_____ <b>\$86.08</b>
15d. Other insurance. Specify: <b>State Taxes</b>	15d.	_____ <b>\$40.50</b>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <b>Federal Taxes</b>	16.	_____ <b>\$169.75</b>
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	_____ <b>\$279.85</b>
17b. Car payments for Vehicle 2	17b.	_____
17c. Other. Specify: _____	17c.	_____
17d. Other. Specify: _____	17d.	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19.	_____

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property	20a.	_____
20b. Real estate taxes	20b.	_____
20c. Property, homeowner's, or renter's insurance	20c.	_____
20d. Maintenance, repair, and upkeep expenses	20d.	_____
20e. Homeowner's association or condominium dues	20e.	_____

21. Other. Specify: \_\_\_\_\_ 21. + \_\_\_\_\_

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.	22a.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">\$3,495.90</div>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	_____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">\$3,495.90</div>

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">\$3,552.93</div>
23b. Copy your monthly expenses from line 22c above.	23b.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">-\$3,495.90</div>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">\$57.03</div>

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

None.

Fill in this information to identify your case:

Debtor 1 Angela C Loisi  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number  
(if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☐ No

☒ Yes. Name of person Daiva Indriuliene

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

Angela C Loisi  
Angela C Loisi, Debtor 1

Date 10/01/2016  
MM / DD / YYYY

X

\_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<u>Angela</u>	<u>C</u>	<u>Loisi</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

**Official Form 107**

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

1. **What is your current marital status?**  
☐ Married  
☒ Not married
2. **During the last 3 years, have you lived anywhere other than where you live now?**  
☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.
3. **Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**  
(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  
☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

**Angela**  
First Name

**C**  
Middle Name

**Loisi**  
Last Name

Case number (if known) \_\_\_\_\_

## Part 2:

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	<b>Sources of income</b> Check all that apply.	<b>Sources of income</b> Check all that apply.
	<b>Gross income</b> (before deductions and exclusions)	<b>Gross income</b> (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the last calendar year:</b> (January 1 to December 31, <u>2015</u> )	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2014</u> )	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

5. **Did you receive any other income during this year or the two previous calendar years?**  
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☒ No  
☐ Yes. Fill in the details.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- ☐ No. Go to line 7.
- ☐ Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.
- ☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
<b>Ocwen Loan Servicing, LLC</b>	<b>10/01/2016</b>	<b>\$3,643.83</b>	<b>\$361,069.68</b>	<input checked="" type="checkbox"/> Mortgage
Creditor's name	09/01/2016			<input type="checkbox"/> Car
<b>PO Box 24738</b>	08/01/2016			<input type="checkbox"/> Credit card
Number Street				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other _____
<b>West Palm Beach</b>	<b>FL</b>	<b>33416-4738</b>		
City	State	ZIP Code		

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☒ No
- ☐ Yes. List all payments to an insider.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No  
☐ Yes. List all payments that benefited an insider.

#### Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No  
☐ Yes. Fill in the details.

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.  
☐ Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No  
☐ Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.



Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No  
☐ Yes. Fill in the details.

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No  
☒ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred USD	Date payment or transfer was made	Amount of payment
<u>Daiva Indriuliene</u> 15028 S. Cicero, Suite C Number Street		<u>09/25/2016</u>	<u>\$50.00</u>
<u>Oak Forest</u> <u>IL</u> <u>60452</u> City State ZIP Code			

Email or website address \_\_\_\_\_

Person Who Made the Payment, if Not You \_\_\_\_\_

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No  
☐ Yes. Fill in the details.

**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No  
☐ Yes. Fill in the details.

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation  
☐ No. None of the above applies. Go to Part 12.  
☒ Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business  
MAC Transcripts, LTD  
Business Name

Employer Identification number  
Do not include Social Security number or ITIN.

EIN: \_\_\_\_\_

1326 N. Burling Street,  
Number Street Name of accountant or bookkeeper

Dates business existed

From \_\_\_\_\_ To \_\_\_\_\_

Chicago IL 60610  
City State ZIP Code

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No  
☐ Yes. Fill in the details below.

Debtor 1 Angela C Loisi Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X Angela C Loisi  
Angela C Loisi, Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date 10/01/2016

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No  
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ No  
☒ Yes. Name of person Daiva Indriuliene

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Fill in this information to identify your case:**

Debtor 1	<u>Angela</u>	<u>C</u>	<u>Loisi</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

**Official Form 108**

**Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Hold Secured Claims**

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

Creditor's name: **Franklin Credit Management Co**

Description of property securing debt: **Primary Residence**

- ☐ Surrender the property.  
☐ Retain the property and redeem it.  
☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

☐ No  
☒ Yes

Creditor's name: **HONDA Finance**

Description of property securing debt: **Honda CR-V**

- ☐ Surrender the property.  
☐ Retain the property and redeem it.  
☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☒ Retain the property and [explain]:  
**Lease that ends in May of 2017**

☐ No  
☐ Yes

Creditor's name: **Ocwen Loan Servicing, LLC**

Description of property securing debt: **Primary Residence**

- ☐ Surrender the property.  
☐ Retain the property and redeem it.  
☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

☐ No  
☒ Yes

Debtor 1 **Angela** **C** **Loisi** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

Lessor's name: **HONDA Finance**  
Description of leased property: **Auto lease with father**

☐ No  
☒ Yes

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X Angela C Loisi  
Angela C Loisi, Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date **10/01/2016**  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

**CERTIFICATE OF SERVICE**

I, the below signed, do hereby certify that a true and correct copy of the foregoing Statement of Intention for Individuals Filing Under Chapter 7 was mailed or otherwise served to the Chapter 7 Trustee, the secured creditors as listed on Schedule D, the United States Trustee and/or to any other interested parties as may be required by B.R. 1007 and applicable local bankruptcy rules.

Date **10/1/2016**

Daiva Indriuliene

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.  
*Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

**You should have an attorney review your decision to file for bankruptcy and the choice of chapter.**

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### Chapter 7: Liquidation

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	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form--sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

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## Chapter 11: Reorganization

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	\$1,167	filing fee
+	\$550	administrative fee
	<hr/>	
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.



## Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

[http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure)

### **Bankruptcy crimes have serious consequences**

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### **Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together--called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### **Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

[http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html)

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Angela C Loisi**


CASE NO

CHAPTER **7**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 10/1/2016

Signature   
**Angela C Loisi**

Date \_\_\_\_\_

Signature \_\_\_\_\_

ADT Security Services  
P.O. Box 672279  
Dallas, TX 75267-2279

Allied Interstate, Inc  
POB 4000  
Warrenton VA 20188

AMERICA EXPRESS  
P.O. BOX 7871  
Fort Lauderdale, FL 33329

American Financial CRE  
9247 N Meridian St., Suite 2  
Indianapolis, IN 46260

Arnold Scott Harris, P.C.  
222 Merchandise Mart Plaza, Suite 1932  
Chicago, IL 60654

Athletic & Therapeutic Inst  
4947 Paysphere Circle  
Chicago, IL 60674-4947

BARCLAYS BANK DELAWARE  
1007 Orange St., Suite 1541  
WILMINGTON, DE 19801

Blatt, Haseenmiller, Leibsker & Moore LL  
10 South LaSalle St., Suite 2200  
Chicago, IL 60603-1069

Calvary Portfolio Service, LLC  
P.O. Box 27288  
Tempe, AZ 85285-7288

Capital One  
PO Box 85015  
Richmond, VA 23285-5075

Capital One Bank  
PO. Box 5253  
Carol Stream, IL 60197

Capital One Bank  
PO Box 85015  
Richmond, VA 23285

Capital One Bank  
Kierland One  
Scottsdale, AZ 85254

Capital One/Best Buy  
PO Box 30253  
Salt Lake City, UT 84130.0253

CB/Annty Lr  
PO.Box 182273  
Columbus, OH 43218

CB/DRSSBRN  
PO. Box 182273  
Columbus, OH 43218

CB/VICSCRT  
PO Box 182789  
Columbus, OH 43218

Chase  
201 N Walnut St.  
Wilmington, DE 19801

Chase - CC  
225 Chastain Meadows Ct, NW  
Kennesaw, GA 30144

Chase/Circuitcity  
225 Chastain Meadows Ct, NW  
Kennesaw, GA 30144

Chicago Gastroenterology  
Dr. Samuel Castillo  
1431 N Western Ave., Suite 133  
Chicago, IL 60622

Choice Recovery  
1550 Old Henderson Rd St,  
Columbus, OH 43220

Citi  
PO Box 6500 C/O Citi Corp  
Sioux Falls, SD 57117

CitiFLEX  
PO Box 6241  
Sioux Falls, SD 57117

City of Chicago  
Department of Revenue  
POB 88292  
Chicago IL 60680-1290

Credit Control, LLC  
P.O. Box 31179  
Tampa, FL 33631

Credit Protection Association, L.P.  
13355 Noel Rd  
Dallas, TX 75240

Diversified Consultants, Inc.  
PO Box 551268  
Jacksonville FL 32255.1268

DSG Collect  
P.O. BOX 80185  
Phoenix, AZ 85060

Dupage Credit Union  
1515 Bond St.  
Naperville, IL 60563

Dynamic Recovery Solutions  
PO Box 25759  
Greenville SC 29616-0759

Dynia & Associates, LLC  
1400 E. Touhy Ave., Suite G2  
Des Plaines, IL 60018

EIS Collections  
P.O. Box 1730  
Reynoldzburg, OH 43068-8730

FMS Inc.  
PO Box 707601  
Tulsa, OK 74170-7601

Franklin Collection Services  
2978 W Jackson St.  
Tupelo MS 38801

Franklin Credit Management Co  
101 Hudson St., 25th Flr.  
Jersey City, NJ 07302

Global Credit & Collection Corp  
2699 Lee Rd.  
Winter Park, FL 32789

Grant & Weber  
1515 E. Tropicana Ave Ste  
Las Vegas, NV 89119

HONDA Finance  
P.O. Box: 60001  
City Of Industry, CA 91716

I.C. SYSTEM, INC.  
444 Highway 96 East,  
P.O. Box 64378  
ST. PAUL, MN 55164-0378

I.C.S., Collection Service  
PO Box 1010  
Tinley Park, IL 60477-9110

J.C. Christensen & Associates, Inc  
P.O. Box 519  
Sauk Rapids, MN 56379

Labarotary Corporation of America  
P.O. Box 2240  
Burlington, NC 27216-2240

Law Offices of Joel Cardis, LLC  
2006 Sweede Rd., Suite 100  
E. Norriton, PA 19401

Merchants' Credit Guide Co.  
223 W Jackson St  
Chicago, IL 60606



Midwest Orthopaedic at RUSH, LLC  
1Westbrook Corporate Center, Suite 240  
Westchester, IL 60154

Nationwide Credit, Inc.  
P.O. Box 26314  
Lehigh Vally PA 18002

Navient  
Department of Education and Loan Service  
P.O. Box 9635  
Wilkes-Barre, PA 18773-9635

NCB Management Services Incorporated  
PO Box 1099  
Langhorne, PA 19047

Northland Group Inc.  
PO Box 390846  
Minneapolis, MN 55439  
Mail Code CPT1

Ocwen Loan Servicing, LLC  
PO Box 24738  
West Palm Beach, FL 33416-4738

Phillips & Cohen Associates, LTD  
Mailstop 661, 1002 Justison St.,  
Wilmington, DE 19801.5148

Portfolio Recvry & Affil  
120 Corporate Blvd, #1  
Norfolk, VA 23502

Professional Debt Collectors  
P.O. Box 90508  
Sioux Falls, SD 57109-0508

Quest Diagnostics  
PO Box 7306  
Holiister, MO 65673-7306

RCN  
Bradley Place Business Center  
2640 West Bradley Place,  
Chicago, IL 60618

Resurrection Med Grp St Mary  
P.O. Box 366  
Hinsdale, IL 60522

RMCB  
4 Westchester Plaza,  
Bldg. 4, F1  
MsFord, NY 10523

SKO Brenner American, Inc.  
40 Daniel Street  
PO Box 230  
Frmngdale, NY 11735-0230

Specified Credit Association, Inc  
2388 Schuetz, Suite A-100,  
St. Louis, MO 963146

SYNCB/AMAZ  
PO. Box 981432  
El Paso, TX 79998

SYNCB/CARE  
P.O. BOX 276 Mail Code Oh3-4258  
Dayton, OH 45401

SYNCB/CARE  
P.O. BOX 276  
Dayton, OH 45401

SYNCB/JCP  
PO BOX 965008  
Orlando, FL 32896-5060

SYNCB/JCP  
PO Box 981131  
El Paso, TX 79998

SYNCB/TJX  
4125 Windward Plaza  
Alpharetta, GA 30005

THE NORTHWESTERN SPECIALISTS FOR WOMEN,  
P.O. BOX: 95145  
PALATINE, IL 60095-5145

TransWorld Systems Inc  
507 Prudential Rd.  
Horsham, PA 19044

Trustmark Recovery Services  
541 Otis Bowen Drive  
Munster IN 46321

VON MAUR  
6565 Brady  
Davenport, IA 52806

Weltzer-Maite PC DBA Pearle Express  
5501 W 79TH ST Suite 400  
Burbank, IL 60459-2190

Wrigleyville Dental  
Holistic Dentistry  
3256 North Ashland Ave.,  
Chicago, IL 60657

ADT Security Services  
P.O. Box 672279  
Dallas, TX 75267-2279

Capital One Bank  
PO. Box 5253  
Carol Stream, IL 60197

Chicago Gastroenterology  
Dr. Samuel Castillo  
1431 N Western Ave., Suite 13  
Chicago, IL 60622

Allied Interstate, Inc  
POB 4000  
Warrenton VA 20188

Capital One Bank  
PO Box 85015  
Richmond, VA 23285

Choice Recovery  
1550 Old Henderson Rd St,  
Columbus, OH 43220

AMERICA EXPRESS  
P.O. BOX 7871  
Fort Lauderdale, FL 33329

Capital One Bank  
Kierland One  
Scottsdale, AZ 85254

Citi  
PO Box 6500 C/O Citi Corp  
Sioux Falls, SD 57117

American Financial CRE  
9247 N Meridian St., Suite 2  
Indianapolis, IN 46260

Capital One/Best Buy  
PO Box 30253  
Salt Lake City, UT 84130.0253

CitiFLEX  
PO Box 6241  
Sioux Falls, SD 57117

Arnold Scott Harris, P.C.  
222 Merchandise Mart Plaza, Sui  
Chicago, IL 60654

CB/Annty Lr  
PO.Box 182273  
Columbus, OH 43218

City of Chicago  
Department of Revenue  
POB 88292  
Chicago IL 60680-1290

Athletic & Therapeutic Inst  
4947 Paysphere Circle  
Chicago, IL 60674-4947

CB/DRSSBRN  
PO. Box 182273  
Columbus, OH 43218

Credit Control, LLC  
P.O. Box 31179  
Tampa, FL 33631

BARCLAYS BANK DELAWARE  
1007 Orange St., Suite 1541  
WILMINGTON, DE 19801

CB/VICSCRT  
PO Box 182789  
Columbus, OH 43218

Credit Protection Association  
13355 Noel Rd  
Dallas, TX 75240

Blatt, Haseenmiller, Leibsker &  
10 South LaSalle St., Suite 220  
Chicago, IL 60603-1069

Chase  
201 N Walnut St.  
Wilmington, DE 19801

Diversified Consultants, Inc.  
PO Box 551268  
Jacksonville FL 32255.1268

Calvary Portfolio Service, LLC  
P.O. Box 27288  
Tempe, AZ 85285-7288

Chase - CC  
225 Chastain Meadows Ct, NW  
Kennesaw, GA 30144

DSG Collect  
P.O. BOX 80185  
Phoenix, AZ 85060

Capital One  
PO Box 85015  
Richmond, VA 23285-5075

Chase/Circuitcity  
225 Chastain Meadows Ct, NW  
Kennesaw, GA 30144

Dupage Credit Union  
1515 Bond St.  
Naperville, IL 60563

Dynamic Recovery Solutions  
PO Box 25759  
Greenville SC 29616-0759

I.C.S., Collection Service  
PO Box 1010  
Tinley Park, IL 60477-9110

Ocwen Loan Servicing, LLC  
PO Box 24738  
West Palm Beach, FL 33416-473

Dynia & Associates, LLC  
1400 E. Touhy Ave., Suite G2  
Des Plaines, IL 60018

J.C. Christensen & Associates,  
P.O. Box 519  
Sauk Rapids, MN 56379

Phillips & Cohen Associates,  
Mailstop 661, 1002 Justison S  
Wilmington, DE 19801.5148

EIS Collections  
P.O. Box 1730  
Reynoldzburg, OH 43068-8730

Labarotary Corporation of Ameri  
P.O. Box 2240  
Burlington, NC 27216-2240

Portfolio Recvry & Affil  
120 Corporate Blvd, #1  
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FMS Inc.  
PO Box 707601  
Tulsa, OK 74170-7601

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2006 Sweede Rd., Suite 100  
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Professional Debt Collectors  
P.O. Box 90508  
Sioux Falls, SD 57109-0508

Franklin Collection Services  
2978 W Jackson St.  
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223 W Jackson St  
Chicago, IL 60606

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101 Hudson St., 25th Flr.  
Jersey City, NJ 07302

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1Westbrook Corporate Center, Su  
Westchester, IL 60154

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Global Credit & Collection Corp  
2699 Lee Rd.  
Winter Park, FL 32789

Nationwide Credit, Inc.  
P.O. Box 26314  
Lehigh Vally PA 18002

Resurrection Med Grp St Mary  
P.O. Box 366  
Hinsdale, IL 60522

Grant & Weber  
1515 E. Tropicana Ave Ste  
Las Vegas, NV 89119

Navient  
Department of Education and Loa  
P.O. Box 9635  
Wilkes-Barre, PA 18773-9635

RMCB  
4 Westchester Plaza,  
Bldg. 4, Fl  
MsFord, NY 10523

HONDA Finance  
P.O. Box: 60001  
City Of Industry, CA 91716

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PO Box 1099  
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SKO Brenner American, Inc.  
40 Daniel Street  
PO Box 230  
Frmngdale, NY 11735-0230

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444 Highway 96 East,  
P.O. Box 64378  
ST. PAUL, MN 55164-0378

Northland Group Inc.  
PO Box 390846  
Minneapolis, MN 55439  
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2388 Schuetz, Suite A-100,  
St. Louis, MO 963146

SYNCB/AMAZ  
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5501 W 79TH ST Suite 400  
Burbank, IL 60459-2190

SYNCB/CARE  
P.O. BOX 276 Mail Code Oh3-4258  
Dayton, OH 45401

Wrigleyville Dental  
Holistic Dentistry  
3256 North Ashland Ave.,  
Chicago, IL 60657

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P.O. BOX 276  
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PO BOX 965008  
Orlando, FL 32896-5060

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PO Box 981131  
El Paso, TX 79998

SYNCB/TJX  
4125 Windward Plaza  
Alpharetta, GA 30005

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P.O. BOX: 95145  
PALATINE, IL 60095-5145

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Trustmark Recovery Services  
541 Otis Bowen Drive  
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Davenport, IA 52806

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Chicago, IL 60618

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Winter Park, FL 32789

Nationwide Credit, Inc.  
P.O. Box 26314  
Lehigh Vally PA 18002

Resurrection Med Grp St Mary  
P.O. Box 366  
Hinsdale, IL 60522

Grant & Weber  
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Las Vegas, NV 89119

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Department of Education and  
Loan Service  
P.O. Box 9635  
Wilkes-Barre, PA 18773-9635

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MsFord, NY 10523

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Frmngdale, NY 11735-0230

I.C. SYSTEM, INC.  
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Northland Group Inc.  
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St. Louis, MO 963146



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El Paso, TX 79998

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Express  
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Burbank, IL 60459-2190

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4258  
Dayton, OH 45401

Wrigleyville Dental  
Holistic Dentistry  
3256 North Ashland Ave.,  
Chicago, IL 60657

SYNCB/CARE  
P.O. BOX 276  
Dayton, OH 45401

SYNCB/JCP  
PO BOX 965008  
Orlando, FL 32896-5060

SYNCB/JCP  
PO Box 981131  
El Paso, TX 79998

SYNCB/TJX  
4125 Windward Plaza  
Alpharetta, GA 30005

THE NORTHWESTERN SPECIALISTS  
FOR WOMEN,  
P.O. BOX: 95145  
PALATINE, IL 60095-5145

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507 Prudential Rd.  
Horsham, PA 19044

Trustmark Recovery Services  
541 Otis Bowen Drive  
Munster IN 46321

VON MAUR  
6565 Brady  
Davenport, IA 52806

**UNITED STATES BANKRUPTCY COURT FOR THE**

*NORTHERN DISTRICT OF ILLINOIS*

*EASTERN DIVISION (CHICAGO)*

In re:

**Angela C Loisi**

Case No.:

SSN: **xxx-xx-6969**

SSN:

Debtor(s)

**Numbered Listing of Creditors**

Address:

**1326 N. Burling St.  
Chicago, IL 60610**

Chapter: **7**

	Creditor name and mailing address	Category of claim	Amount of claim
1.	ADT Security Services P.O. Box 672279 Dallas, TX 75267-2279 112217583	Unsecured Claim	\$108.00
2.	Allied Interstate, Inc POB 4000 Warrenton VA 20188 551061848355	Unsecured Claim	\$206.45
3.	AMERICA EXPRESS P.O. BOX 7871 Fort Lauderdale, FL 33329 3499911487185703	Unsecured Claim	\$3,861.00
4.	American Financial CRE 9247 N Meridian St., Suite 2 Indianapolis, IN 46260 A100SME1004673677	Unsecured Claim	\$37.00
5.	Arnold Scott Harris, P.C. 222 Merchandise Mart Plaza, Suite 1932 Chicago, IL 60654 5115024920	Unsecured Claim	\$122.00
6.	Athletic & Therapeutic Inst 4947 Paysphere Circle Chicago, IL 60674-4947 868137	Unsecured Claim	\$267.83

in re: **Angela C Loisi**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
7.	BARCLAYS BANK DELAWARE 1007 Orange St., Suite 1541 WILMINGTON, DE 19801 514021802821	Unsecured Claim	\$836.00
8.	Blatt, Haseenmiller, Leibsker & Moore LL 10 South LaSalle St., Suite 2200 Chicago, IL 60603-1069 2678945	Unsecured Claim	\$5,348.69
9.	Calvary Portfolio Service, LLC P.O. Box 27288 Tempe, AZ 85285-7288 18492963	Unsecured Claim	\$755.02
10.	Capital One PO Box 85015 Richmond, VA 23285-5075 479124910443	Unsecured Claim	\$1,805.00
11.	Capital One Bank PO. Box 5253 Carol Stream, IL 60197 5491-1000-2160-0609	Unsecured Claim	\$300.00
12.	Capital One Bank PO Box 85015 Richmond, VA 23285 517805230279	Unsecured Claim	\$317.00
13.	Capital One Bank Kierland One Scottsdale, AZ 85254 601138100004	Unsecured Claim	\$1,800.00
14.	Capital One Bank PO. Box 5253 Carol Stream, IL 60197 549110002058	Unsecured Claim	\$930.00
15.	Capital One Bank PO Box 85015 Richmond, VA 23285 438864708153	Unsecured Claim	\$5,350.00

in re: **Angela C Loisi**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
16.	Capital One/Best Buy PO Box 30253 Salt Lake City, UT 84130.0253 169602-2164853107	Unsecured Claim	\$356.00
17.	CB/Annty Lr PO.Box 182273 Columbus, OH 43218 585637303072	Unsecured Claim	\$750.00
18.	CB/DRSSBRN PO. Box 182273 Columbus, OH 43218 585637245202	Unsecured Claim	\$500.00
19.	CB/VICSCRT PO Box 182789 Columbus, OH 43218 864787481	Unsecured Claim	\$460.00
20.	Chase 201 N Walnut St. Wilmington, DE 19801 426684116238	Unsecured Claim	\$3,843.00
21.	Chase - CC 225 Chastain Meadows Ct, NW Kennesaw, GA 30144 1727204060176250	Unsecured Claim	\$300.00
22.	Chase/Circuitcity 225 Chastain Meadows Ct, NW Kennesaw, GA 30144 xxxx	Unsecured Claim	\$541.00
23.	Chicago Gastroenterology Dr. Samuel Castillo 1431 N Western Ave., Suite 133 Chicago, IL 60622 CA585633	Unsecured Claim	\$585.50
24.	Choice Recovery 1550 Old Henderson Rd St, Columbus, OH 43220 17923154	Unsecured Claim	\$183.00

in re: **Angela C Loisi**

Debtor		Case No. (if known)
Creditor name and mailing address	Category of claim	Amount of claim
25. Citi PO Box 6500 C/O Citi Corp Sioux Falls, SD 57117 xxxx	Unsecured Claim	\$1,972.00
26. CitiFLEX PO Box 6241 Sioux Falls, SD 57117 7510790031292794	Unsecured Claim	\$7,166.00
27. City of Chicago Department of Revenue POB 88292 Chicago IL 60680-1290 5115024920	Unsecured Claim	\$200.00
28. Credit Control, LLC P.O. Box 31179 Tampa, FL 33631 5128950	Unsecured Claim	\$7,166.43
29. Credit Protection Association, L.P. 13355 Noel Rd Dallas, TX 75240 12-075059-1332153046-00	Unsecured Claim	\$150.00
30. Diversified Consultants, Inc. PO Box 551268 Jacksonville FL 32255.1268 43767465	Unsecured Claim	\$237.16
31. DSG Collect P.O. BOX 80185 Phoenix, AZ 85060 46334	Unsecured Claim	\$226.00
32. Dupage Credit Union 1515 Bond St. Naperville, IL 60563 771183901	Unsecured Claim	\$4,000.00
33. Dynamic Recovery Solutions PO Box 25759 Greenville SC 29616-0759 048023112	Unsecured Claim	\$755.02

in re: **Angela C Loisi**

Debtor		Case No. (if known)
Creditor name and mailing address	Category of claim	Amount of claim
34. Dynia & Associates, LLC 1400 E. Touhy Ave., Suite G2 Des Plaines, IL 60018 2065554	Unsecured Claim	\$755.02
35. EIS Collections P.O. Box 1730 Reynoldzburg, OH 43068-8730 1000083406	Unsecured Claim	\$7,166.43
36. FMS Inc. PO Box 707601 Tulsa, OK 74170-7601 33386367	Unsecured Claim	\$7,166.43
37. Franklin Collection Services 2978 W Jackson St. Tupelo MS 38801 1028660013	Unsecured Claim	\$237.00
38. Franklin Credit Management Co 101 Hudson St., 25th Flr. Jersey City, NJ 07302 1978030	Secured Claim	\$38,000.00
39. Global Credit & Collection Corp 2699 Lee Rd. Winter Park, FL 32789 30275384	Unsecured Claim	\$7,166.43
40. Grant & Weber 1515 E. Tropicana Ave Ste Las Vegas, NV 89119 050339603	Unsecured Claim	\$75.00
41. HONDA Finance P.O. Box: 60001 City Of Industry, CA 91716 181529811	Secured Claim	\$1,679.00
42. I.C. SYSTEM, INC. 444 Highway 96 East, P.O. Box 64378 ST. PAUL, MN 55164-0378 014-0676933-04	Unsecured Claim	\$127.10

in re: **Angela C Loisi**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
43.	I.C.S., Collection Service PO Box 1010 Tinley Park, IL 60477-9110 15801425	Unsecured Claim	\$235.60
44.	J.C. Christensen & Associates, Inc P.O. Box 519 Sauk Rapids, MN 56379 17648239	Unsecured Claim	\$755.02
45.	Labarotary Corporation of America P.O. Box 2240 Burlington, NC 27216-2240 12220463	Unsecured Claim	\$2,216.80
46.	Labarotary Corporation of America P.O. Box 2240 Burlington, NC 27216-2240 12220463	Unsecured Claim	\$2,216.80
47.	Law Offices of Joel Cardis, LLC 2006 Sweede Rd., Suite 100 E. Norriton, PA 19401 3644565	Unsecured Claim	\$457.70
48.	Merchants' Credit Guide Co. 223 W Jackson St Chicago, IL 60606 8152085990	Unsecured Claim	\$50.00
49.	Midwest Orthopaedic at RUSH, LLC 1Westbrook Corporate Center, Suite 240 Westchester, IL 60154 297025	Unsecured Claim	\$50.00
50.	Nationwide Credit, Inc. P.O. Box 26314 Lehigh Vally PA 18002 11245118739	Unsecured Claim	\$836.67
51.	Navient Department of Education and Loan Service P.O. Box 9635 Wilkes-Barre, PA 18773-9635 99652192011000220021	Unsecured Claim	\$22,547.00

in re: **Angela C Loisi**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
52.	NCB Management Services Incorporated PO Box 1099 Langhorne, PA 19047 1004252024	Unsecured Claim	\$753.58
53.	Northland Group Inc. PO Box 390846 Minneapolis, MN 55439 Mail Code CPT1 F76699594	Unsecured Claim	\$1,805.15
54.	Ocwen Loan Servicing, LLC PO Box 24738 West Palm Beach, FL 33416-4738 7090013181	Secured Claim	\$361,069.68
55.	Phillips & Cohen Associates, LTD Mailstop 661, 1002 Justison St., Wilmington, DE 19801.5148 20125445	Unsecured Claim	\$836.67
56.	Portfolio Recvry & Affil 120 Corporate Blvd, #1 Norfolk, VA 23502 4791-2491-0443-2560	Unsecured Claim	\$1,805.00
57.	Professional Debt Collectors P.O. Box 90508 Sioux Falls, SD 57109-0508 2233481	Unsecured Claim	\$232.27
58.	Quest Diagnostics PO Box 7306 Hollister, MO 65673-7306 7786870851	Unsecured Claim	\$30.00
59.	RCN Bradley Place Business Center 2640 West Bradley Place, Chicago, IL 60618 1001-0676933-04	Unsecured Claim	\$281.48
60.	Resurrection Med Grp St Mary P.O. Box 366 Hinsdale, IL 60522 003 144178	Unsecured Claim	\$30.80



in re: **Angela C Loisi**

Debtor		Case No. (if known)
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61. Resurrection Med Grp St Mary P.O. Box 366 Hinsdale, IL 60522 E1223200217	Unsecured Claim	\$75.52
62. RMCB 4 Westchester Plaza, Bldg. 4, F1 MsFord, NY 10523 0354327835	Unsecured Claim	\$44.11
63. SKO Brenner American, Inc. 40 Daniel Street PO Box 230 Frmngdale, NY 11735-0230 23070571387	Unsecured Claim	\$45.85
64. Specified Credit Association, Inc 2388 Schuetz, Suite A-100, St. Louis, MO 963146 174891	Unsecured Claim	\$275.60
65. SYNCB/AMAZ PO. Box 981432 El Paso, TX 79998 6045781061063581457	Unsecured Claim	\$600.00
66. SYNCB/CARE P.O. BOX 276 Mail Code Oh3-4258 Dayton, OH 45401 601918035905	Unsecured Claim	\$3,500.00
67. SYNCB/CARE P.O. BOX 276 Dayton, OH 45401 6034610048159571	Unsecured Claim	\$3,500.00
68. SYNCB/JCP PO BOX 965008 Orlando, FL 32896-5060 600889118542	Unsecured Claim	\$182.00
69. SYNCB/JCP PO Box 981131 El Paso, TX 79998 xxxx	Unsecured Claim	\$182.00

in re: **Angela C Loisi**

Debtor		Case No. (if known)
Creditor name and mailing address	Category of claim	Amount of claim
70. SYNCB/TJX 4125 Windward Plaza Alpharetta, GA 30005 6045851024190050	Unsecured Claim	\$300.00
71. THE NORTHWESTERN SPECIALISTS FOR WOMEN, P.O. BOX: 95145 PALATINE, IL 60095-5145 43578	Unsecured Claim	\$650.00
72. TransWorld Systems Inc 507 Prudential Rd. Horsham, PA 19044 9082U-0000868137	Unsecured Claim	\$267.83
73. Trustmark Recovery Services 541 Otis Bowen Drive Munster IN 46321 1168.00	Unsecured Claim	\$1,168.00
74. VON MAUR 6565 Brady Davenport, IA 52806 13764147	Unsecured Claim	\$818.00
75. Weltzer-Maite PC DBA Pearle Express 5501 W 79TH ST Suite 400 Burbank, IL 60459-2190 537001-10136494	Unsecured Claim	\$20.00
76. Wrigleyville Dental Holistic Dentistry 3256 North Ashland Ave., Chicago, IL 60657 LO0067	Unsecured Claim	\$1,272.30

in re: Angela C Loisi

Debtor

Case No. (if known)

(The penalty for making a false statement or concealing property is a fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. secs. 152 and 3571.)

**DECLARATION**

I, Angela C Loisi

named as debtor in this case, declare under penalty of perjury that I have read the foregoing *Numbered Listing of Creditors*, consisting of 10 sheets (including this declaration), and that it is true and correct to the best of my information and belief.

Debtor:

Angela C Loisi

Date: 10/1/2016

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Angela C Loisi**

CASE NO.

CHAPTER 7

**Certificate of Service**

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00927-ILN-DE024674035

ADT Security Services  
112217583  
P.O. Box 672279  
Dallas, TX 75267-2279

Athletic & Therapeutic Inst  
868137  
4947 Paysphere Circle  
Chicago, IL 60674-4947

Capital One Bank  
517805230279  
PO Box 85015  
Richmond, VA 23285

Allied Interstate, Inc  
551061848355  
POB 4000  
Warrenton VA 20188

BARCLAYS BANK DELAWARE  
514021802821  
1007 Orange St., Suite 1541  
WILMINGTON, DE 19801

Capital One Bank  
601138100004  
Kierland One  
Scottsdale, AZ 85254

AMERICA EXPRESS  
3499911487185703  
P.O. BOX 7871  
Fort Lauderdale, FL 33329

Blatt, Haseenmiller, Leibsker & Moore  
LL  
2678945  
10 South LaSalle St., Suite 2200  
Chicago, IL 60603-1069

Capital One Bank  
549110002058  
PO. Box 5253  
Carol Stream, IL 60197

American Financial CRE  
A100SME1004673677  
9247 N Meridian St., Suite 2  
Indianapolis, IN 46260

Calvary Portfolio Service, LLC  
18492963  
P.O. Box 27288  
Tempe, AZ 85285-7288

Capital One Bank  
438864708153  
PO Box 85015  
Richmond, VA 23285

Angela C Loisi  
1326 N. Burling St.  
Chicago, IL 60610

Capital One  
479124910443  
PO Box 85015  
Richmond, VA 23285-5075

Capital One/Best Buy  
169602-2164853107  
PO Box 30253  
Salt Lake City, UT 84130.0253

Arnold Scott Harris, P.C.  
5115024920  
222 Merchandise Mart Plaza, Suite  
1932  
Chicago, IL 60654

Capital One Bank  
5491-1000-2160-0609  
PO. Box 5253  
Carol Stream, IL 60197

CB/Annty Lr  
585637303072  
PO.Box 182273  
Columbus, OH 43218

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Angela C Loisi**

CASE NO.

CHAPTER 7

**Certificate of Service**

(Continuation Sheet #1)

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CB/DRSSBRN 585637245202 PO. Box 182273 Columbus, OH 43218	Citi xxxx PO Box 6500 C/O Citi Corp Sioux Falls, SD 57117	Dupage Credit Union 771183901 1515 Bond St. Naperville, IL 60563
CB/VICSCRT 864787481 PO Box 182789 Columbus, OH 43218	CitiFLEX 7510790031292794 PO Box 6241 Sioux Falls, SD 57117	Dynamic Recovery Solutions 048023112 PO Box 25759 Greenville SC 29616-0759
Chase 426684116238 201 N Walnut St. Wilmington, DE 19801	City of Chicago 5115024920 Department of Revenue POB 88292 Chicago IL 60680-1290	Dynia & Associates, LLC 2065554 1400 E. Touhy Ave., Suite G2 Des Plaines, IL 60018
Chase - CC 1727204060176250 225 Chastain Meadows Ct, NW Kennesaw, GA 30144	Credit Control, LLC 5128950 P.O. Box 31179 Tampa, FL 33631	EIS Collections 1000083406 P.O. Box 1730 Reynoldzburg, OH 43068-8730
Chase/Circuitcity xxxx 225 Chastain Meadows Ct, NW Kennesaw, GA 30144	Credit Protection Association, L.P. 12-075059-1332153046-00 13355 Noel Rd Dallas, TX 75240	FMS Inc. 33386367 PO Box 707601 Tulsa, OK 74170-7601
Chicago Gastroenterology CA585633 Dr. Samuel Castillo 1431 N Western Ave., Suite 133 Chicago, IL 60622	Diversified Consultants, Inc. 43767465 PO Box 551268 Jacksonville FL 32255.1268	Franklin Collection Services 1028660013 2978 W Jackson St. Tupelo MS 38801
Choice Recovery 17923154 1550 Old Henderson Rd St, Columbus, OH 43220	DSG Collect 46334 P.O. BOX 80185 Phoenix, AZ 85060	Franklin Credit Management Co 1978030 101 Hudson St., 25th Flr. Jersey City, NJ 07302

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Angela C Loisi**

CASE NO.

CHAPTER 7

**Certificate of Service**

(Continuation Sheet #2)

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Global Credit & Collection Corp 30275384 2699 Lee Rd. Winter Park, FL 32789	Law Offices of Joel Cardis, LLC 3644565 2006 Sweede Rd., Suite 100 E. Norriton, PA 19401	Ocwen Loan Servicing, LLC 7090013181 PO Box 24738 West Palm Beach, FL 33416-4738
Grant & Weber 050339603 1515 E. Tropicana Ave Ste Las Vegas, NV 89119	Merchants' Credit Guide Co. 8152085990 223 W Jackson St Chicago, IL 60606	Phillips & Cohen Associates, LTD 20125445 Mailstop 661, 1002 Justison St., Wilmington, DE 19801.5148
HONDA Finance 181529811 P.O. Box: 60001 City Of Industry, CA 91716	Midwest Orthopaedic at RUSH, LLC 297025 1Westbrook Corporate Center, Suite 240 Westchester, IL 60154	Portfolio Recvry & Affil 4791-2491-0443-2560 120 Corporate Blvd, #1 Norfolk, VA 23502
I.C. SYSTEM, INC. 014-0676933-04 444 Highway 96 East, P.O. Box 64378 ST. PAUL, MN 55164-0378	Nationwide Credit, Inc. 11245118739 P.O. Box 26314 Lehigh Vally PA 18002	Professional Debt Collectors 2233481 P.O. Box 90508 Sioux Falls, SD 57109-0508
I.C.S., Collection Service 15801425 PO Box 1010 Tinley Park, IL 60477-9110	Navient 99652192011000220021 Department of Education and Loan Service P.O. Box 9635 Wilkes-Barre, PA 18773-9635	Quest Diagnostics 7786870851 PO Box 7306 Holiister, MO 65673-7306
J.C. Christensen & Associates, Inc 17648239 P.O. Box 519 Sauk Rapids, MN 56379	NCB Management Services Incorporated 1004252024 PO Box 1099 Langhorne, PA 19047	RCN 1001-0676933-04 Bradley Place Business Center 2640 West Bradley Place, Chicago, IL 60618
Labarotary Corporation of America 12220463 P.O. Box 2240 Burlington, NC 27216-2240	Northland Group Inc. F76699594 PO Box 390846 Minneapolis, MN 55439 Mail Code CPT1	Resurrection Med Grp St Mary 003 144178 P.O. Box 366 Hinsdale, IL 60522

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Angela C Loisi**

CASE NO.

CHAPTER 7

**Certificate of Service**

(Continuation Sheet #3)

Resurrection Med Grp St Mary  
E1223200217  
P.O. Box 366  
Hinsdale, IL 60522

SYNCB/JCP  
600889118542  
PO BOX 965008  
Orlando, FL 32896-5060

Weltzer-Maite PC DBA Pearle Express  
537001-10136494  
5501 W 79TH ST Suite 400  
Burbank, IL 60459-2190

RMCB  
0354327835  
4 Westchester Plaza,  
Bldg. 4, F1  
MsFord, NY 10523

SYNCB/JCP  
xxxx  
PO Box 981131  
El Paso, TX 79998

Wrigleyville Dental  
LO0067  
Holistic Dentistry  
3256 North Ashland Ave.,  
Chicago, IL 60657

SKO Brenner American, Inc.  
23070571387  
40 Daniel Street  
PO Box 230  
Frmngdale, NY 11735-0230

SYNCB/TJX  
6045851024190050  
4125 Windward Plaza  
Alpharetta, GA 30005

Specified Credit Association, Inc  
174891  
2388 Schuetz, Suite A-100,  
St. Louis, MO 963146

THE NORTHWESTERN SPECIALISTS  
FOR WOMEN,  
43578  
P.O. BOX: 95145  
PALATINE, IL 60095-5145

SYNCB/AMAZ  
6045781061063581457  
PO. Box 981432  
El Paso, TX 79998

TransWorld Systems Inc  
9082U-0000868137  
507 Prudential Rd.  
Horsham, PA 19044

SYNCB/CARE  
601918035905  
P.O. BOX 276 Mail Code Oh3-4258  
Dayton, OH 45401

Trustmark Recovery Services  
1168.00  
541 Otis Bowen Drive  
Munster IN 46321

SYNCB/CARE  
6034610048159571  
P.O. BOX 276  
Dayton, OH 45401

VON MAUR  
13764147  
6565 Brady  
Davenport, IA 52806